

MAY 20 2003

K030508

1. General Information:

Company: Depilase Group Ltd  
One Canada Square  
Canary Wharf  
London E14 5DY  
United Kingdom

Contact Person: Dr. Mario Luca Russo

Preparation: 11-15-02

Device Trade Name: DEPILASE TRIO LASE Laser System

Common Name: Long Pulsed Nd:YAG and Alexandrite Surgical, Powered, Laser  
79 -GEX  
21 CFR 878-48

***I. Description***

The DEPILASE TRIO LASE Laser System is based on Nd: YAG and Alexandrite laser technology. Within the same system, one optical cavity contains the Nd: YAG crystal, and another optical cavity contains the Alexandrite crystal, which are activated by means of the use of a flashlamp. After each cavity, a red diode aiming beam is reflected onto a coaxial beam path using a beamsplitter assembly. The combined therapeutic and aiming beams are guided down an individual optical fibre delivery system to a focusing handpiece. The laser is used in a non-contact mode.

The DEPILASE TRIO LASE Laser System is designed with 6 major sub-systems:

- a) A high voltage power supply which converts and rectifies the a.c. mains current to provide regulated power for the flashlamp simmer current and main triggering pulse.
- b) A cooling system consisting of an internal water flow circuit together with water to air heat exchanger.
- c) An Nd: YAG laser rod, capable of generating optical pulses at a frequency up to 2 Hz.
- d) An Alexandrite laser rod, capable of generating optical pulses at a frequency up to 2 Hz.
- e) Two optical delivery systems, interfacing the energy from each laser cavity to the patient via an independent optical fibre and focusing handpiece.
- f) The microprocessor based controller which regulates the functions of the laser and allows parameter selection by the user.

The DEPILASE TRIO LASE Laser System is indicated for the coagulation and haemostasis of vascular lesions, the removal and permanent reduction of unwanted hair in Fitzpatrick skin types I – VI, including suntanned skin and the dermatological applications for the non invasive treatment of facial wrinkles

### ***III. Summary of Substantial Equivalence***

Depilase believes that its DEPILASE TRIO LASE Laser System system is substantially equivalent, regarding the Nd:YAG laser emission, to the Laserscope Lyra (K990718, K020021), and Altus Medical Aesthetic CoolGlide (K991798) Nd: YAG Lasers previously cleared for both the coagulation and hemostasis of vascular lesions, the removal and permanent reduction of unwanted hair in Fitzpatrick skin types I – VI, including suntanned skin types and the non invasive treatment of wrinkles, regarding the 532 nm laser emission to the Fotona Dualis KTP (K011939), previously cleared for the coagulation and haemostasis of vascular lesions and regarding the Alexandrite laser emission, to the Candela GentleLASE GL (K994260), GentleLASE II (K984601) and the Cynosure Apogee TSK (K992757) Alexandrite lasers, all previously cleared for the removal of unwanted hair in Fitzpatrick skin types I – IV

They therefore have the same Intended Use as the DEPILASE TRIO LASE Laser System.

Technologically, the predicate devices have identical characteristics to the DEPILASE TRIO LASE Laser System, all comprising a flashlamp pumped Nd: YAG laser rod generating light at a wavelength of 1064 nm or 532nm, or a flashlamp pumped Alexandrite laser rod generating light at a wavelength of 755 nm which is subsequently delivered to the patient via an individual optical fibre delivery system and focusing handpiece.

The DEPILASE TRIO LASE Laser System output characteristics are very similar to those of the predicate devices.

All lasers are microprocessor controlled devices.

All lasers utilize Class I aiming beams which pose no hazard to the user.

All systems utilize an internal closed loop water-air heat exchange circuit for optimal thermal control of the laser cavity.

The risk and benefits of the DEPILASE TRIO LASE Laser System are comparable to the predicate devices when used for similar clinical applications.

It is therefore believed that there are no new questions of Safety or Effectiveness raised by the introduction of this device.



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Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

Dr. Mario Luca Russo  
Director of Research and Development  
Depilase Group Ltd.  
One Canada Square  
Canary Wharf  
London E14 5DY  
UK

Re: K030508  
Trade/Device Name: Depilase Trio Lase Laser System  
Regulation Number: 21 CFR 878.4810  
Regulation Name: Laser surgical instrument for use in general  
and plastic surgery and in dermatology  
Regulatory Class: II  
Product Code: GEX  
Dated: January 5, 2003  
Received: February 19, 2003

Dear Dr. Russo:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

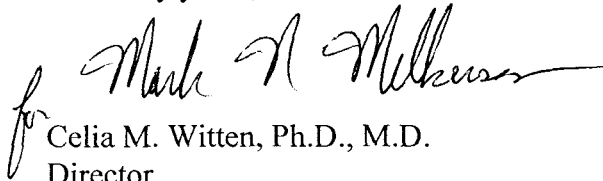
If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (301) 594-4659. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97) you may obtain. Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/dsma/dsmamain.html>

Sincerely yours,

for Celia M. Witten, Ph.D., M.D.

Director  
Division of General, Restorative  
and Neurological Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

# INDICATIONS FOR USE STATEMENT

510 (K) Number (if known): K030508

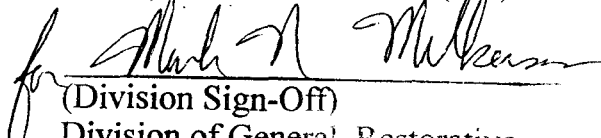
Device Name: DEPILASE TRIO LASE LASER SYSTEM

## Indications For Use:

The DEPILASE TRIO LASE Laser System is intended for the coagulation and haemostasis of vascular lesions ( 532 and 1064 nm ), the removal and permanent reduction of unwanted hair in Fitzpatrick skin types I –VI, including suntanned skin types (755 and 1064 nm) and the dermatological applications for the non invasive treatment of facial wrinkles (1064 nm).

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

  
(Division Sign-Off)  
Division of General, Restorative  
and Neurological Devices

510(k) Number: K030508

Prescription Use \_\_\_\_\_  
(per 21 CFR 801.109)

OR

Over The Counter Use \_\_\_\_\_

Premarket Notification for DEPILASE TRIO LASE Laser System